



**NOTICE OF APPEAL FROM THE PRIMARY EXAMINER
TO THE BOARD OF APPEALS**

Shuguang Zhang, Alexander Rich, Lin Yan and George Whitesides

Application No.: 08/882,415 Group: 1618

Filed: June 25, 1997 Examiner: M. Garcia

For: SELF-ASSEMBLING PEPTIDE SURFACES FOR CELL
PATTERNING AND INTERACTIONS

CERTIFICATE OF MAILING	
<p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231</p>	
on	<u>8/30/95</u>
Date	<u>Jean Hibino</u> Jean Hibino
Typed or printed name of person signing certificate	

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TECH CENTER 1600/2900

Assistant Commissioner for Patents
Box AF
Washington, D.C. 20231

Sir:

Applicant hereby appeals to the Board of Appeals from the decision dated March 30, 1999 of the Primary Examiner finally rejecting claims 1-19. The item(s) checked below are appropriate:

1. [X] Applicant hereby petitions to extend the time for filing a Notice of Appeal in response to the Office Action Made Final dated March 30, 1999 for two months from June 30, 1999 to August 30, 1999.
 2. [] A [] month extension of time to respond to the Office Action Made Final dated [] was filed on [] with payment of a \$[] fee.
[] Applicant hereby petitions for an additional [] month extension of time to respond to the Office Action Made Final.
 3. [] An Oral Hearing before the Board of Appeals is respectfully requested.

09/01/1999 CVOROCH 00000113 08802415

01 FC:119
02 FC:116

300.00 OP
300.00 OP

4. Fees are submitted for the following:

<input checked="" type="checkbox"/> Extension of Time for two months	\$ <u>380</u>
<input type="checkbox"/> Additional Extension of Time:	
Fee for Extension ([] mo.)	\$ _____
Less fee paid ([] mo.)	- \$ _____
Balance of fee due	\$ <u>0</u>
<input type="checkbox"/> Oral Hearing	\$ _____
<input checked="" type="checkbox"/> Notice of Appeal	\$ <u>300</u>
<input type="checkbox"/> Other _____	\$ _____
TOTAL \$ <u>680</u>	

5. The method of payment for the total fees is as follows:

- A check in the amount of \$680.00 is enclosed.
- Please charge Deposit Account No. 08-0380 in the amount of \$[].

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this document is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH, REYNOLDS, P.C.

By Alice O. Carroll 33542 for

David E. Brook
Registration No.: 22,592
Tel.: (781) 861-6240
Fax: (781) 861-9540

Lexington, Massachusetts 02421-4799

Date: August 30, 1999

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